

**2017 HEWT Medical/Vision**  
*Employee Contribution Rates*

Level of Coverage	Group Health Options		
	Weekly	Bi-Weekly	Monthly
Individual	\$40.49	\$80.99	\$175.47
Individual Plus One	\$74.10	\$148.20	\$321.10
Individual Plus More Than One	\$124.31	\$248.63	\$538.69

Level of Coverage	UnitedHealthcare PPO		
	Weekly	Bi-Weekly	Monthly
Individual	\$61.68	\$123.36	\$267.28
Individual Plus One	\$120.46	\$240.92	\$521.99
Individual Plus More Than One	\$172.95	\$345.90	\$749.46

**2017 HEWT Dental**  
*Employee Contribution Rates*

Level of Coverage	Willamette Dental		
	Weekly	Bi-Weekly	Monthly
Individual	\$2.48	\$4.97	\$10.76
Individual Plus One	\$4.98	\$9.95	\$21.56
Individual Plus More Than One	\$9.32	\$18.64	\$40.39

Level of Coverage	Delta Dental of Washington		
	Weekly	Bi-Weekly	Monthly
Individual	\$2.44	\$4.89	\$10.59
Individual Plus One	\$4.42	\$8.84	\$19.15
Individual Plus More Than One	\$6.54	\$13.08	\$28.33